**LEADERSHIP ACCOUNTABILITY AGREEMENT –**

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| **Covering\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Quarter)**  ***Mission: “To deliver personalized patient centered care in an atmosphere that promotes the healing process and enhances the quality of life for the communities we serve.”*** | | |
| **Pillar** | **Goal** | **Results** |
| **Patient/Employee Experience :**   * **Inpatient HCAHPS Score for “Willingness to recommend”**   **“Overall Rating”**   * **ER Survey**   **“Willingness to recommend”**  **“Overall Rating**”   * **Department Huddles** * **Internal Support Services Scorecards** * **Turnover** | **Above 90th Percentile (All Database, AHA, CAH’s, KS)**  **Above 90th Percentile (Press Ganey Data Base)**  **Weekly, Beneficial to all**  **Improvement in areas of weakness-Improvement plan being carried out**  **Clinical: 25%**  **Non-Clinical: 25%** |  |
| **Quality:**   * **# of Service Recovery Uses** * **Dept./Multi-Dept Process Improvement** * **KCIC Initiatives**   **Stroke**  **STEMI**  **Sepsis** | **Minimal, effective**  **Constant, w/involvement from staff**  **Door to CT Head: 20 min**  **Door to CT Interp. 40 min.**  **Door to EKG: 5 min**  **Door to EKG Interp. 10 min.**  **Door to antibiotic time: 1 hour** |  |
| **Finance/Growth:**   * **Operating Margin** * **Accounts Receivable Days** * **Days Cash on Hand** * **Volumes-Clinic**   **-Chargeable visits**  **-New Visits** | **3% overall**  **Clinic: 35 days**  **Hospital: 40 days**  **30 days**  5% >2017 |  |
| * **Safety**   **# of Work Comp. incidents**  **#of lost days due to Work Comp.** | **0** |  |
| * **If there is one thing that needs to be improved, what would it be?** |  |  |

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| **Agreement:** *Effective today’s date, I accept full responsibility and accountability for the above noted goals, including gaining buy-in and support from my staff. My specific goals related to the above organizational goals are:*  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | |
| **Signature:** | **Date:** |

**Patient/Resident/Associate experience initiatives:**

**Update on goals set at last roundtable:**

**# Of times your accountability group has met:**

**Critical Conversations you’ve had:**